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Atty Docket No. 20174C-003000US

PTO FAX NO.: 1-571-273-8300

ATTENTION: Examiner Donald J. Loney

Group Art Unit 1772

OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER Donald J. Loney

CERTIFICATION OF FACSIMILE TRANSMISSION

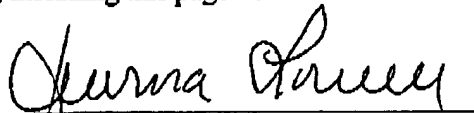
I hereby certify that the following documents in re Application of Marc A. Unger et al., Application No. 09/724,784, filed November 28, 2000 for MICROFABRICATED ELASTOMERIC VALVE AND PUMP SYSTEMS are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal Form (1 page);
2. Petition for Extension of Time (1 page); and
3. Amendment (9 pages).

Number of pages being transmitted, including this page: 12

Dated: March 6, 2006


Aurora Lowell, Assistant to
Milan M. Vinnola, Reg. No. 42,358

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PTO/SB/21 (09-04)

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/724,784
	Filing Date	November 28, 2000
	First Named Inventor	Unger, Marc A.
	Art Unit	1772
	Examiner Name	Donald J. Loney
	Attorney Docket Number	20174C-003000US
Total Number of Pages in This Submission		11

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fees Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature	<i>Milan M. Vinnola</i>		
Printed name	Milan M. Vinnola		
Date	March 6, 2006	Reg. No.	45,979

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. 1-571-273-8300 on March 6, 2006.			
Signature	<i>Aurora Lowell</i>		
Typed or printed name	Aurora Lowell	Date	March 6, 2006

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